

Membership Application

Fax to: 585-263-2493

Membership admits two named adults residing at the same address and up to four children age 18 and younger. The adult(s) named on the membership must present photo ID when visiting. Memberships are not refundable or transferable. Children age 15 and younger must be accompanied by an adult.

Select level Basic \$149 (2 adults and up to 4 children) Basic 5 \$174 (2 adults and up to 5 children) Basic 6 \$199 (2 adults and up to 6 children)	·	 □ Add-a-Guest \$45 (limit one per membership) □ Patron Package \$80 (limit one per membership) 	
☐ Benefactor \$300 ☐ Sustaining \$500	☐ Leading \$1,000	☐ Presidential \$5,000	
Member information			
Adult name #1			
Adult name #2			
Address		Apt	
City	State	Zip	
PhoneEmail			
Gift giver information Complete this	section only if you are giving th	is membership as a gift.	
Adult name			
Address		Apt	
City	State	Zip	
Phone	_Email		
Mail Membership Card To: ☐ To me for presentation to the gift recipient	☐ To the gift recipient directl	y Total Due \$	
Payment information Complete this	section if you are mailing your	payment to the museum.	
Charge my ☐ MasterCard ☐ Visa	☐ Discover Card ☐ Ar	nerican Express	
Card number		Expiration date	
Signature			
☐ Check enclosed for \$p	payable to The Strong. Check	#	

Mail to: The Strong, ATTN: Membership, One Manhattan Square, Rochester, NY 14607